

1 LOCATION OF WATER WELL
 County: LINCOLN Fraction: SE 1/4 SE 1/4 SE 1/4 Section Number: 26 Township Number: T 13 S Range Number: R 6 W

Distance and direction from nearest town or city? ABOUT 7 MI South OF BEVERLY, KS. Street address of well if located within city?

2 WATER WELL OWNER: Jerry Rupert
 RR#, St. Address, Box #: 237 E. Ellsworth
 City, State, ZIP Code: Salina, Ks.
 Board of Agriculture, Division of Water Resources
 Application Number:

3 DEPTH OF COMPLETED WELL: 118 ft. Bore Hole Diameter: 8 in. to 118 ft., and . . . in. to . . . ft.
 Well Water to be used as:
 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 Well's static water level: 80 ft. below land surface measured on 8 month 8 day 1980 year
 Pump Test Data: Well water was 81 ft. after 1 1/2 hours pumping 6 gpm
 Est. Yield 10-15 gpm: Well water was . . . ft. after . . . hours pumping . . . gpm

4 TYPE OF BLANK CASING USED:
 2 PVC 1 Steel 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) Casing Joints: Glued Clamped . . . Welded . . . Threaded . . .
 Blank casing dia: 5 in. to 9.8 ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.
 Casing height above land surface: 12 in., weight 2.5 lbs./ft. Wall thickness or gauge No: 26.7
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 7 PVC 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify) . . . 12 None used (open hole)
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 None (open hole)
 Screen or Perforation Openings Are:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 10 Other (specify) . . .
 Screen-Perforation Dia: 5 in. to 118 ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.
 Screen-Perforated Intervals: From 9.8 ft. to 118 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.
 Gravel Pack Intervals: From 118 ft. to 19 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grouted Intervals: From 6 ft. to 19 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.
 What is the nearest source of possible contamination:
 3 Lateral lines 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)
 13 Watertight sewer lines
 Direction from well: East How many feet: 175? Water Well Disinfected? Yes No
 Was a chemical/bacteriological sample submitted to Department? Yes . . . No If yes, date sample was submitted . . . month . . . day . . . year: Pump Installed? Yes . . . No
 If Yes: Pump Manufacturer's name . . . Model No. . . . HP . . . Volts . . .
 Depth of Pump Intake . . . ft. Pumps Capacity rated at . . . gal./min.
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 9 month 10 day 80 year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138
 This Water Well Record was completed on 9 month 30 day 80 year under the business name of PETERSON IRRIGATION INC. by (signature) Mike Peterson

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	Top Soil			
5	18	Sandstone and rock			
18	25	Red shale			
25	102	Gray shale			
102	114	Gray shale with small sandstone layers			
114	120	Gray shale			

ELEVATION:

Depth(s) Groundwater Encountered 1. 102 ft. 2. . . . ft. 3. . . . ft. 4. . . . ft. (Use a second sheet if needed)

INSTRUCTIONS: Use typewriter or ball point pen, please press firmly and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
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13
R
6
EW
SEC
46
SE 1/4
SE 1/4
SE 1/4
SE 1/4